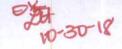
U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.



Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name DAWOL HOMES	Policy Number:					
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li> <li>117 TERRACINA CIRCLE</li> </ul>	Company NAIC Number:					
City State MYRTLE BEACH South Carolina	ZIP Code 29588					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) THE GATES UNIT 4, PHASE 7						
A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5: Latitude/Longitude: Lat. N-33-37-44 Long. W-79-01-33 Horizontal Dat	um: NAD 1927 X NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood ins	urance.					
A7. Building Diagram Number 1A						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s)  N/A sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A8.b N/A sq in						
d) Engineered flood openings?						
A9. For a building with an attached garage:						
a) Square footage of attached garage N/A sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacen	t grade N/A					
c) Total net area of flood openings in A9.b N/A sq in						
d) Engineered flood openings?	FUEH					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	MATION					
B1. NFIP Community Name & Community Number B2. County Name	B3. State					
450104-HORRY HORRY	South Carolina					
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s)	. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)					
45051C0670 H 09-17-2003 12-93-2004 AE* 23						
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in It	em B9:					
☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other/Source: *LOMR #04-0423						
B11. Indicate elevation datum used for BFE in Item B9:	Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pr	otected Area (OPA)? Yes X No					
Designation Date: CBRS OPA						

**ELEVATION CERTIFICATE** 

OMB No. 1660-0008 Projection Date: November 30, 20

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or P.O. Route and Box No. Policy Number: 117 TERRACINA CIRCLE Company NAIC Number City State ZIP Code 29588 MYRTLE BEACH South Carolina SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Construction Drawings\* Building Under Construction\* | Finished Construction C1. Building elevations are based on: \*A new Elevation Certificate will be required when construction of the building is complete. C2\_Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: RTK GPS VIA SC VRN NETWORK Vertical Datum: NGVD 1929 Indicate elevation datum used for the elevations in items a) through h) below. X NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 25.56 x feet meters Top of bottom floor (including basement, crawlspace, or enclosure floor) N/A x feet meters b) Top of the next higher floor N/A x feet meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A x feet meters d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building 25.27 x feet meters (Describe type of equipment and location in Comments) 25.03 x feet meters 1) Lowest adjacent (finished) grade next to building (LAG) 25.39 x feet meters g) Highest adjacent (finished) grade next to building (HAG) Lowest adjacent grade at lowest elevation of deck or stairs, including N/A x feet meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a licensed land surveyor? X Yes No X Check here if attachments. License Number Certifier's Name SC 27446 F. WILLIAM FAIREY, IV Title PROFESSIONAL LAND SURVEYOR Company Name SPARTINA LAND SURVEYING Address **602 MAIN STREET** State ZIP Code CONWAY South Carolina 29526 Telephone Date Fxt Signature 10-25-2018 (843) 340-0285 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) B7, B8, B9 - FIRM PANEL IS DATED 8/23/1999, BASE FLOOD ELEVATION PER LOMR#04-0423P ISSUED 12/03/04, THIS IS BFE ENFORCED BY HORRY COUNTY FLOODPLAIN MANAGEMENT. C2.b - NO ACCESS TO SECOND FLOOR AT TIME OF SURVEY

84335 K657 10/29/18

## **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.  Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  117 TERRACINA CIRCLE				FOR INSURANCE COMPANY USE Policy Number:	
					City MYRTLE BEACH

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption FRONT VIEW

Clear Photo One



Photo Two Caption REAR VIEW

Replaces all previous editions.

Clear Photo Two

FEMA Form 086-0-33 (7/15)

Form Page 5 of 6